## TOWN OF ENFIELD APPLICATION FOR VACANCY ON BOARDS, AGENCIES & COMMISSIONS

DATE:	
NAME:	
ADDRESS:	
TELEPHONE NO. (Home)	(Work)
OCCUPATION	(E-Mail)
REGISTERED VOTER(Yes) _	(No) PARTY AFFILIATION
BOARD, COMMISSION OR AGENCY I	NTERESTED IN:
NEW APPOINTMENT:	REAPPOINTMENT:
Please outline your qualifications and or commission.	I how you feel you would contribute to the committee
Have you ever served on a Board, Co	ommission or Agency in Enfield or elsewhere?
	ommission or Agency and time served
If this is a reappointment, please list months	the number of meetings attended during the last 12
If the committee or commission which	ch you requested has no more vacancies, would you
consider appointment to another con	nmittee or commission?

Return Application to: Town Manager's Office Town of Enfield

Town of Enfield 820 Enfield Street Enfield, CT 06082

THANK YOU FOR YOUR INTEREST IN THE TOWN OF ENFIELD AND TAKING THE TIME TO FILL OUT THIS APPLICATION.